

Highlights of the Governor's Recommended Budget for Mental Health
For Vermont State Hospital

- \$1.2 million to fund new positions and personal services contracts. Among these new positions: two nurse educators, 13 nurses (to bring the nurse-to-patient ratio to 1:4) and five records specialists, to assure documentation is complete and accurate.

For the Mental Health Futures Initiative

- Funding for a director, two policy staff, a half-time staff attorney, a half-time administrative assistant, a facilities consultant and a consultant for the Certificate of Need (CON) process for a new inpatient facility.
- \$4.9 million to operate sub-acute and secure residential programs.
- \$715,978 to begin implementation of other Futures projects, including
 - Community Based Hospital Diversion Support: \$212,836 (These programs help reduce our reliance on inpatient care by providing intensive community-based services to individuals experiencing acute psychiatric distress.)
 - Peer Support Services: \$79,961 (Peer support services have proven very effective and relatively inexpensive in virtually all fields of medicine and human services. This will allow a modest expansion of these services.)
 - Adult Alternative Transportation: \$94,960 (Similar to the situation that existed with transporting children by sheriffs to involuntary inpatient care; all adults are currently transported by sheriffs – whether this is clinically necessary or not. These resources will allow us to begin developing an alternative approach for adults.)
 - Care Management System: \$328,221 (The proposed care management system is designed to assure that Vermont's most expensive acute care resources are used efficiently, and that Vermonters have access to the levels of care they need. The care management system is a collaboration of all inpatient and community providers establishing common admissions and discharge criteria.)
- Housing, annualization of peer-support services, and additional crisis beds are proposed to be developed in future years.
- Capital costs for planning for a new inpatient facility are in Department of Buildings and General Services' appropriation.

Elsewhere in the Mental Health System

- \$4.1 million general fund increase to Designated & Specialized Service Agencies. In order to provide these agencies with funding they can count on for planning purposes, a commitment was made to increase their appropriations by 7.5 percent in general fund monies to support inflationary and caseload needs. This year's recommendation:

- 4 percent inflationary increase.
 - .6 percent (or \$607,091) going toward caseload pressures in the Children's Division.
 - \$85,000 set aside for further sustainability study needs.
- Increase in Children's Collaboratives: \$10,137,030 (Mental Health collaborates with other State partners who choose to purchase mental health services in support of their needs. Examples are school-based programs, therapeutic childcare settings, and children requiring wrap-around supports under Department for Children and Families custody.)
 - New SIG (State Incentive Grant) Co-Occurring Federal Grant: \$828,227 (This is a SAMSHA grant. The Vermont Integrated Services Project will focus on improving Vermont's capacity to provide effective treatment for individuals with co-occurring substance and mental health disorders being served by the publicly funded outpatient behavioral health treatment systems operated by the Health Department.)
 - Increase to Vermont Legal Aid Contract: \$50,000 (Vermont Legal Aid acts as a pass-through to fund legally entitled psychiatric "second opinions," and the caseload costs paid for by Legal Aid has grown incrementally over the past several years. This will allow funding to be consistent with expenses incurred.)
 - Child Alternative Transportation: \$15,000 (These funds will be used for either a vehicle rental or for a mental health professional to accompany a driver to escort to an inpatient facility a child who requires involuntary care but does not need restraints.)

VDH Receives Board of Health Reporting List

Pursuant to conditions of Vermont State Hospital's operating license, the Board of Health provided the Department of Health this week with a list of details about issues the hospital is required to report on each month. The communication is posted on the Mental Health Update web page. (Minutes of the Board of Health meeting at which the license was issued are posted on the same page under the January 6 Update.)

Futures: Amended Agenda for Monday's Futures Group Meeting

(The meeting is from 2 to 4:30 p.m. in the Skylight Conference Room of the Waterbury State Office Complex.)

- Overview of new developments (Paul Blake, Beth Tanzman)
- Report from the care management work group
 - Principles for client movement through the system (Nick Emlen)
 - Defining a sub-acute level of care (Tom Simpatico)
 - Advisory group discussion
 - Public comment
 - Recommendation
- Peer services program approach (Nick Nichols)
 - Design input, advisory group discussion
 - Public comment
 - Next steps

- Family & peer participation in Futures process (Nick Nichols)
 - Input, discussion, public comment
- Proposed program: Greensboro
 - Status report (Eric Grims)
 - Program description (Eric Grims)
 - Advisory group discussion
 - Public comment
- Housing (Brian Smith)
 - Advisory group discussion, public comment, next steps
- Wrap-up, schedule of meetings (Beth Tanzman)

Futures: Actuarial Services Bidder Selected

A selection committee met on Tuesday to review proposals for actuarial services received in response to a recent RFP. The contract will be for expert assistance in determining the bed capacities needed for adult psychiatric inpatient services to replace the Vermont State Hospital. A preferred bidder was selected and contract terms are under discussion, with emphasis placed on an early start date for the work to be performed.

Futures: Care Management Work Group Meets

The care management work group tackled the issue of the sub-acute programs and voluntary or involuntary treatment at its meeting last Friday. This discussion flowed from a summary document prepared by Tom Simpatico reflecting the levels-of-care (sub) work group's thoughts to date. (Note: this sub work group meets at the same time and place announced for the care management work group.) The levels-of-care work group offered the following:

- Sub-acute rehabilitation units are 24-hr residential units, community based, and intended to assist persons to transition out of more restrictive treatment settings, *i.e.* Vermont State Hospital.
- They are intended to provide voluntary treatment.
- They are able to take patients under an order of non-hospitalization (ONH).
- They would have the capacity to handle agitated patients by virtue of providing one-to-one or possibly two-to-one staff monitoring as well as affording time in a quiet room.
- Short-term manual restraint would be available, but mechanical restraints and emergency involuntary medications would not be available.
- Containment would largely be provided by staff surveillance, although exterior doors would have the capacity to lock if deemed clinically necessary.
- The covering psychiatrist could be present in the program within one-hour of notification.

The full minutes of the meeting are posted on the Mental Health Update web page under this week's Update.

Futures: Stakeholders Meet With Architecture+

Approximately 20 mental health stakeholders and state staff met with representatives of the Troy, New York firm Architecture+ ("Architecture Plus," www.aplususa.com/) on Wednesday for a four-hour introductory meeting. The firm, contracting with the Department of Buildings and General Services, is about to begin design and site selection work for the primary inpatient replacement service and for the smaller capacities recommended by the Futures Group.

Additional meetings are planned with a work group comprised of any Futures Group member who wishes to participate, along with other invitees, including consumer and family members.

Staff at Fletcher Allen Health Care and at Vermont State Hospital are being invited to provide information to Architecture+ by filling out and returning the firm's primary care unit questionnaire, and staff at Rutland Regional and Retreat Healthcare are being asked to fill out and return the "smaller capacity" care unit questionnaire. Both questionnaires are posted on the Mental Health Update webpage under January 13.

Other groups and individuals will be asked to fill out relevant portions of the questionnaires, and comments from anyone using the questionnaires are welcome.

Architecture+ work group meetings are planned as follows (all meetings at the Department of Health offices, 108 Cherry Street, Burlington):

- Monday, February 6, 1-4 p.m.
- Tuesday, February 21, 1-4 p.m.
- Friday, March 3, 1-4 p.m.
- Tuesday, March 14, 1-4 p.m.
- Monday, April 3, 1-4 p.m.
- Monday, May 22, 1-4 p.m.
- Monday, June 12, all day.

Efforts also are under way to convene one focus group of current Vermont State Hospital inpatients and a second focus group of recent inpatients to work with Architecture+.

Futures: Upcoming Meetings

- Futures Advisory Group Meeting, Monday, January 23, 2 – 4:30 p.m., Skylight Conference Room, Waterbury State Office Complex.
- Sub-acute Rehabilitation and Secure Residential Work Group, Wednesday, February 1, 9–11 a.m., Medical Director's Office, Vermont State Hospital, Waterbury.
- Architecture+ work group meeting, Monday, February 6, 1-4 p.m., Department of Health offices, 108 Cherry Street, Burlington.
- Burlington City Council: briefing by State, FAHC and neighborhood representatives, February 6, evening meeting, time yet to be determined, Contois Auditorium, Burlington City Hall.

SAMHSA Transformation Evaluation Posted

As noted last week, the Health Department host a follow up meeting this afternoon for individuals who were involved in the development and support of Vermont's application to the 2005 Substance Abuse and Mental Health Administration's Mental Health Transformation State Incentive Grant program. SAMHSA's evaluation of Vermont's application is now posted on the Mental Health Update web page, under this week's Update.

Minutes for Recent Committee Meeting Posted

The Department of Health's website is being redesigned and a new website, incorporating portions of the old Developmental and Mental Health website, will be published soon. The new site will have a section for meeting agendas and minutes. In the meantime, minutes for the January 9 Statewide Program Standing Committee for Adult Mental Health are posted on the Mental Health Update web page under this week's Update, as is a schedule of the committee's meetings for 2006.

VSH Census

The Vermont State Hospital census was 51 as of midnight Thursday night. The average census for the past 45 days was just short of 48.

Questions and comments about the Mental Health Update may be directed to John Howland Jr. (howland@vdh.state.vt.us). If you are reading a print version of this Update, you may find the web version at www.healthyvermonters.info/mh/mhindex.shtml